Horizons Health of Coastal Horizons Center Wilmington, NC Cohort 5

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Tips from the Graduating Class

General Overview

General information:

- **In 2015, CHC celebrated 45 years in operation, promoting choices for healthier lives and safer communities. CHC was the first SU/MH provider in NC to receive federal funding through SAMHSA to open a primary care clinic.**
- **HHS primary care is supported by 2 midlevel providers (FNP & PA-C), 2 CMAs, 1 Office Manager, 1 Office Assistant, 1 Wellness Health Coach, and 1 Care Integration Coordinator.**
- **Current # of clients enrolled in our PBHCI program to date: 1433 over Tri-county sites served**

Primary care provision

- **Primary Care partner – FQHC MedNorth, Wilmington, NC**
- **PC services provided in all Tri-county sites: New Hanover Monday – Thursday, Brunswick on Fridays, Pender on 2nd & 4th Wednesday of the month**
- **MedNorth FQHC contracts 27 hours/week of FNP**

Horizons Health Model

- **HHS is a team-based primary care medical clinic serving adults and children 12 years and older with urgent complaints & chronic disease management. We provide health coaching by our Wellness Specialists to help achieve and maintain good health thru nutrition & fitness workshops, weight management, diabetes education, cholesterol management and tobacco recovery.**
- **Our goal is to serve as a medical home, and to integrate primary care services into the array of mental health and substance use disorder services of Coastal Horizons to reduce illness, increase longevity, and to improve quality of life.**

Accomplishments

- **Our hospital utilization data indicates our established patients have a lower rate of Emergency Department visits (12%) as compared to our new patients (38%). Since the inception of the project, data indicates that established patients were almost 2.5 times less likely to have an ED visit when engaged in primary care.**

- **Although it has taken several years, our hospital and our public funding MCO now believes in what we do and have agreed to funding our model of integrated care beyond the grant period. The hospital is going to fund us over the next 2 years to hire a mobile team to round with the ED staff daily, and assist them in "safely transitioning" ED patients into our Integrated Care array of services. Our MCO is funding us, with expectations of specific outcomes, over the next 18-24 months.**

- ***NOMs Point in Time TRAC Report: All Years (to date) Percent Positive***

Healthy overall 40.4% ; Functioning in everyday life 43.8%; No serious psychological distress 59.7%; Were never using illegal substances 64.7%; Were not using tobacco products 32.6%; Were not binge drinking 89.9%; Retained in the community 85.0%; Had a stable place to live 48.3%; Attending school regularly and/or currently employed/retired 38.0%; Had no involvement with the criminal justice system 98.1%; Socially connected 65.6%

- ***NOMs Section Health Indicator Measures Outcome Improved:***

Blood Pressure – Combined 14.0%; Waist Circumference 36.3%; Breath CO 46.7%; HgbA1c 80.0%; HDL Cholesterol 80.0%; LDL Cholesterol 100.0%; Triglycerides 80.0%

If I Knew Then What I Know Now…

***Spend lots of time & energy working on the internal marketing and team building to make care integration more the "treatment as usual" approach for your array of staff & services.**

***Focus on collecting data that will tell your story in the language (and addressing the needs) of the entities and people that will ultimately be making decisions about future contracting and sustainability.**

***Don't underestimate the power & contributions of your patients in building your Care Integration Advisory Board.**

Moving Forward

- **What will change about your model/services?**
  - **We will expand our partnerships beyond the one FQHC to include the hospital, the MCO, and other safety net primary care providers.**
  - **We are going to be offering our services to a wider array of patient/clientele, and not limited to specific BH diagnoses.**
  - **We are working to develop partnerships that will include Pharmacy services for our patients**

- **Challenges**
  - **- external: funding & the delays in Medicaid expansion in NC**
  - **- internal: getting a higher percentage of BH clients engaged in primary care as part of their treatment experience**